

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	11/20
FORMALITY REVIEW	BS	67369	12/21
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/21/09
2	✓	✓	=
3	✓	0	=
4	✓	0	=
5	✓	0	=
6	✓	0	=
7	✓	✓	=
8	✓	✓	=
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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